

Multimedia Appendix 5: Detailed GRADE Evidence Tables

Table 1: Grade table for any internet-based interventions

Patient or population: Caregivers

Intervention: Internet-based interventions

Comparison: Control

Outcomes	Anticipated absolute effects* (95% CI)		Relative effect (95% CI)	No of participants (studies)	Quality of the evidence (GRADE)	Comments
	Risk with Control	Risk with eTechnology based interventions				
Change in Depression	-	SMD 0.19 SD lower (0.43 lower to 0.05 higher)	-	829 (8 RCTs) ^a	⊕○○○ ○ VERY LOW ^{b,c,d,e}	Assessed using 20-item Center for Epidemiologic Studies Depression Scale (range: 0-60) in 7 studies and 21-item Beck Depression Inventory (range: 0-63) in one study.
Change in Stress / Distress	-	SMD 0.48 SD lower (0.75 lower to 0.22 lower)	-	585 (6 RCTs) ^f	⊕⊕○○ ○ LOW ^{b,d}	Assessed using Perceived Stress Scale, Interpersonal Reactivity Index, Neuropsychiatric Inventory, Perceived Stress Scale and 2 items stress scale across studies.
Change in Anxiety	-	SMD 0.4 SD lower (0.58 lower to 0.22 lower)	-	479 (2 RCTs) ^g	⊕⊕○○ ○ LOW ^{b,d}	Assessed using 10-item State-Trait Anxiety Inventory (range:0-40) in one study and 7-item Hospital Anxiety and Depression Scale (0-21) in the other study.
Change in Coping	-	SMD 0.01 SD lower (0.2 lower to 0.19 higher)	-	403 (2 RCTs) ^h	⊕○○○ ○ VERY LOW ^{b,d,e}	Assessed using 15-item Revised Ways of Coping scale (range: 15-60) in one study and 5-point Likert type Brief Cope scale in the other study.

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Intervention: Internet-based interventions

Comparison: Control

Outcomes	Anticipated absolute effects* (95% CI)		Relative effect (95% CI)	No of participants (studies)	Quality of the evidence (GRADE)	Comments
	Risk with Control	Risk with eTechnology based interventions				
Change in Overall Mental health	-	SMD 0.29 SD lower (0.69 lower to 0.11 higher)	-	97 (1 RCT) ⁱ	⊕○○○ ○ VERY LOW ^{b,j}	Assessed using 16-item subset of negative mood items from the Short Version Profile of Mood States (SV-POMS). Likert-type items are rated on scales from 0–4.
Change in Quality of life	-	SMD 0.01 SD higher (0.49 lower to 0.51 higher)	-	219 (4 RCTs) ^k	⊕○○○ ○ VERY LOW ^{b,d,j}	Assessed using 19-item Perceived quality of life, 15-item Quality of Life in Alzheimer's Disease Informal caregivers, 2-item Quality of Life scale, and Quality of Life questionnaire across studies.
Change in Overall Health	-	SMD 0.35 SD higher (1.3 lower to 2 higher)	-	68 (2 RCTs) ^l	⊕○○○ ○ VERY LOW ^{b,d,j}	Assessed using Nottingham Health Profile (range: 0-100) in one study and EuroQoL, 5 item questionnaire covering five dimensions of QoL in the other study.

Quality assessment							N ₂ of patients		Effect		Quality	Importance
N ₂ of studies	Study design	Risk of bias	Inconsistency	Indirectness	Imprecision	Other considerations	eTechnology based interventions	Control	Relative (95% CI)	Absolute (95% CI)		
2 ^h	randomised trials	serious ^b	not serious	serious ^d	serious ^e	none	199	204	-	SMD 0.01 SD lower (0.2 lower to 0.19 higher)	⊕○○○ ○ VERY LOW	CRITICAL
Change in Overall Mental health												
1 ⁱ	randomised trials	serious ^b	not serious	not serious	very serious ^j	none	45	52	-	SMD 0.29 SD lower (0.69 lower to 0.11 higher)	⊕○○○ ○ VERY LOW	CRITICAL
Change in Quality of life												
4 ^k	randomised trials	serious ^b	not serious	serious ^d	very serious ^j	none	102	117	-	SMD 0.01 SD higher (0.49 lower to 0.51 higher)	⊕○○○ ○ VERY LOW	CRITICAL
Change in Overall Health												

Quality assessment							No of patients		Effect		Quality	Importance
No of studies	Study design	Risk of bias	Inconsistency	Indirectness	Imprecision	Other considerations	eTechnology based interventions	Control	Relative (95% CI)	Absolute (95% CI)		
2 ^l	randomised trials	serious ^b	not serious	serious ^d	very serious ^j	none	34	34	-	SMD 0.35 SD higher (1.3 lower to 2 higher)	⊕○○○ ○ VERY LOW	CRITICAL

CI: Confidence interval; **SMD:** Standardised mean difference

Explanations

a. 1) Beauchamp, 2005; 2) Kajiyama, 2013; 3) Núñez-Naveira, 2016; 4) Cristancho-Lacroix, 2015; 5) Blom, 2015; 6) Pagan-Ortiz, 2014; 7) Pierce, 2009; 8) Smith, 2012.

b. Serious concerns regarding risk of bias.

c. The confidence intervals do not overlap across studies and statistical heterogeneity is moderate (I-squared = 59%; p = 0.02).

d. Serious concerns regarding clinical/methodological heterogeneity across studies due to differences in type and focus of e-technology interventions, length of intervention and informal caregiver population.

e. The effect estimate is imprecise.

f. 1) Beauchamp, 2005; 2) Kajiyama, 2013; 3) Cristancho-Lacroix, 2015; 4) Hattink, 2015; 5) Marzali, 2006; 6) Torkamani, 2014.

g. 1) Beauchamp, 2005; 2) Blom, 2015.

h. 1) Beauchamp, 2005; 2) Namkoong, 2012.

i. DuBenske, 2014

j. The sample size is <300 and effect estimate is imprecise.

k. 1) Kajiyama, 2013; 2) Hattink, 2015; 3) Torkamani, 2014; 4) Hattink, 2016

l. 1) Cristancho-Lacroix, 2015; 2) Torkamani, 2014.

Table 2: Grade table for any internet-based information or education only intervention

Patient or population: Caregivers

Intervention: Technology (Internet: Information / Education only)

Comparison: Control

Outcomes	Anticipated absolute effects* (95% CI)		Relative effect (95% CI)	No of participants (studies)	Quality of the evidence (GRADE)	Comments
	Risk with Control	Risk with Technology (Internet: Information / Education only)				
Change in Depression	-	SMD 0.31 SD lower (0.50 lower to 0.11 lower)	-	402 (2 RCTs) ^a	⊕⊕⊕○ MODERATE _b	Assessed using Center for Epidemiologic Studies Depression Scale: CES-D consisting of 20 items. The total score range is 0 to 60.
Change in Stress / Distress	-	SMD 0.57 SD lower (0.77 lower to 0.37 lower)	-	402 (2 RCTs) ^c	⊕⊕⊕○ MODERATE _b	Assessed using 10-item Perceived Stress scale (range: 0 to 30) in one study and 2-item Stress scale (range: 0 to 9) in the other study.
Change in Anxiety	-	SMD 0.42 SD lower (0.65 lower to 0.19 lower)	-	299 (1 RCT) ^d	⊕⊕⊕○ MODERATE _b	Assessed using 10-item subscale of the State-Trait Anxiety Inventory on a 4-point Likert scale (range: 0 to 30), from 3 (very much so) to 0 (not at all).
Change in coping	-	SMD 0 SD (0.23 lower to 0.23 higher)	-	299 (1 RCT) ^d	⊕⊕○○ LOW ^{e,f}	Assessed using Revised Ways of Coping scale, problem-focused strategies (15 items, range: 15 to 60) on 4-point Likert scale from 1 (never used) to 4 (regularly used).

Table 2: Grade table for any internet-based information or education only intervention

Patient or population: Caregivers

Intervention: Technology (Internet: Information / Education only)

Comparison: Control

Outcomes	Anticipated absolute effects* (95% CI)		Relative effect (95% CI)	No of participants (studies)	Quality of the evidence (GRADE)	Comments
	Risk with Control	Risk with Technology (Internet: Information / Education only)				
Change in Quality of life	-	SMD 0.33 SD higher (0.06 lower to 0.72 higher)	-	103 (1 RCT) ^g	⊕○○○ VERY LOW _{e,f}	Assessed using Perceived quality of life (PQoL) with 19 items describing level of satisfaction.

*The risk in the intervention group (and its 95% confidence interval) is based on the assumed risk in the comparison group and the **relative effect** of the intervention (and its 95% CI).

CI: Confidence interval; SMD: Standardised mean difference

GRADE Working Group grades of evidence

High quality: We are very confident that the true effect lies close to that of the estimate of the effect

Moderate quality: We are moderately confident in the effect estimate: The true effect is likely to be close to the estimate of the effect, but there is a possibility that it is substantially different

Low quality: Our confidence in the effect estimate is limited: The true effect may be substantially different from the estimate of the effect

Very low quality: We have very little confidence in the effect estimate: The true effect is likely to be substantially different from the estimate of effect

Quality assessment							N ₂ of patients		Effect		Quality	Importance
N ₂ of studies	Study design	Risk of bias	Inconsistency	Indirectness	Imprecision	Other considerations	Technology (Internet: Information / Education only)	Control	Relative (95% CI)	Absolute (95% CI)		
Change in Depression												
2 ^a	randomised trials	serious ^b	not serious	not serious	not serious	none	196	206	-	SMD 0.31 SD lower (0.50 lower to 0.11 lower)	⊕⊕⊕○ MODERATE	CRITICAL
Change in Stress / Distress												
2 ^c	randomised trials	serious ^b	not serious	not serious	not serious	none	196	206	-	SMD 0.57 SD lower (0.77 lower to 0.37 lower)	⊕⊕⊕○ MODERATE	CRITICAL
Change in Anxiety												
1 ^d	randomised trials	serious ^b	not serious	not serious	not serious	none	150	149	-	SMD 0.42 SD lower (0.65 lower to 0.19 lower)	⊕⊕⊕○ MODERATE	CRITICAL

Quality assessment							N ₂ of patients		Effect		Quality	Importance
N ₂ of studies	Study design	Risk of bias	Inconsistency	Indirectness	Imprecision	Other considerations	Technology (Internet: Information / Education only)	Control	Relative (95% CI)	Absolute (95% CI)		
Change in coping												
1 ^d	randomised trials	serious ^e	not serious	not serious	serious ^f	none	150	149	-	SMD 0 SD (0.23 lower to 0.23 higher)	⊕⊕○○ LOW	CRITICAL
Change in Quality of life												
1 ^g	randomised trials	serious ^e	not serious	not serious	very serious ^f	none	46	57	-	SMD 0.33 SD higher (0.06 lower to 0.72 higher)	⊕○○○ VERY LOW	CRITICAL

CI: Confidence interval; **SMD:** Standardised mean difference

Explanations

- a. 1) Kajiyama, 2013; 2) Beauchamp, 2005
- b. Serious concerns for risk of bias.
- c. 1) Kajiyama, 2013; 2) Beauchamp, 2005
- d. Beauchamp, 2005
- e. Serious concerns regarding risk of bias.
- f. The effect estimate is imprecise.
- g. Kajiyama, 2013

Table 3: Grade table for any internet-based information or education intervention + peer psychosocial support**Patient or population:** Caregivers**Intervention:** Technology (Internet: Information/Education + Peer psychosocial support)**Comparison:** Control

Outcomes	Anticipated absolute effects* (95% CI)		Relative effect (95% CI)	No of participants (studies)	Quality of the evidence (GRADE)	Comments
	Risk with Control	Risk with Technology (Internet: Information/Education + Peer psychosocial support)				
Change in Depression	-	SMD 0.11 SD lower (0.48 lower to 0.27 higher)	-	110 (2 RCT) ^a	⊕○○○ ○ VERY LOW ^{b,c}	Assessed using 21-item Beck Depression Inventory (BDI-II; range 0 to 63) in 1 study and 20-item Center for Epidemiologic Studies Depression Scale (CES-D; range 0 to 60) in the other study.
Change in Stress / Distress	-	SMD 0.46 SD lower (1.41 lower to 0.5 higher)	-	108 (2 RCTs) ^d	⊕○○○ ○ VERY LOW ^{b,c}	Assessed using 14-item Perceived Stress Scale (PSS-14, range: 0-56) in one study & 28-item Interpersonal Reactivity Index (IRI, 5-point scale, range: 0 to 112) in the other study.
Change in Quality of life	-	SMD 0.36 SD lower (0.95 lower to 0.22 higher)	-	46 (1 RCT) ^e	⊕○○○ ○ VERY LOW ^{b,c}	Assessed using 2-item Quality of life scale on a scale from 1 to 10.
Change in Overall health	-	SMD 0.44 SD lower (1.01 lower to 0.13 higher)	-	49 (1 RCT) ^f	⊕○○○ ○ VERY LOW ^{b,c}	Assessed using Nottingham Health Profile (NHP) with social isolation, emotional reactions, and sleep quality sub-scores and rated each from 0 to 100.

Table 3: Grade table for any internet-based information or education intervention + peer psychosocial support

Patient or population: Caregivers

Intervention: Technology (Internet: Information/Education + Peer psychosocial support)

Comparison: Control

Outcomes	Anticipated absolute effects* (95% CI)		Relative effect (95% CI)	No of participants (studies)	Quality of the evidence (GRADE)	Comments
	Risk with Control	Risk with Technology (Internet: Information/Education + Peer psychosocial support)				
1. Mortality						
2. Morbidity						
3. Quality of life						
4. Adverse events						

***The risk in the intervention group** (and its 95% confidence interval) is based on the assumed risk in the comparison group and the **relative effect** of the intervention (and its 95% CI).

CI: Confidence interval; **SMD:** Standardised mean difference

GRADE Working Group grades of evidence

High quality: We are very confident that the true effect lies close to that of the estimate of the effect

Moderate quality: We are moderately confident in the effect estimate: The true effect is likely to be close to the estimate of the effect, but there is a possibility that it is substantially different

Low quality: Our confidence in the effect estimate is limited: The true effect may be substantially different from the estimate of the effect

Very low quality: We have very little confidence in the effect estimate: The true effect is likely to be substantially different from the estimate of effect

Quality assessment							No of patients		Effect		Quality	Importance
No of studies	Study design	Risk of bias	Inconsistency	Indirectness	Imprecision	Other considerations	Technology (Internet: Information/Education + Peer psychosocial support)	Control	Relative (95% CI)	Absolute (95% CI)		
Change in Depression												

Quality assessment							N _e of patients		Effect		Quality	Importance
N _e of studies	Study design	Risk of bias	Inconsistency	Indirectness	Imprecision	Other considerations	Technology (Internet: Information/Education + Peer psychosocial support)	Control	Relative (95% CI)	Absolute (95% CI)		
1 ^f	randomised trials	serious ^b	not serious	not serious	very serious ^c	none	25	24	-	SMD 0.44 SD lower (1.01 lower to 0.13 higher)	⊕○○○ ○ VERY LOW	CRITICAL

CI: Confidence interval; **SMD:** Standardised mean difference

Explanations

- a. 1) Cristancho-Lacroix, 2015; 2) Núñez-Naveira, 2016
- b. Serious concerns regarding risk of bias.
- c. The sample size is <300 and effect estimate is imprecise.
- d. 1) Cristancho-Lacroix, 2015; 2) Hattink, 2015.
- e. Hattink, 2015
- f. Cristancho-Lacroix, 2015

Table 4: Grade table for any internet-based information or education intervention + professional psychosocial support

Patient or population: Caregivers

Intervention: Technology (Internet: Information/Education + Professional psychosocial support)

Comparison: Control

Outcomes	Anticipated absolute effects* (95% CI)		Relative effect (95% CI)	No of participants (studies)	Quality of the evidence (GRADE)	Comments
	Risk with Control	Risk with Technology (Internet: Information/Education + Professional psychosocial support)				
Change in Depression	-	SMD 0.34 SD lower (0.63 lower to 0.05 lower)	-	180 (1 RCT) ^a	⊕⊕⊕○ MODERATE ^b	Assessed using Center for Epidemiologic Studies Depression Scale: CES-D consisting of 20 items. The total score range is 0 to 60.
Change in Anxiety	-	SMD 0.36 SD lower (0.66 lower to 0.07 lower)	-	180 (1 RCT) ^a	⊕⊕⊕○ MODERATE ^b	Assessed using Hospital Anxiety and Depression Scale: HADS-A, 7-item anxiety subscale. The total score ranges from 0 to 21.

*The risk in the intervention group (and its 95% confidence interval) is based on the assumed risk in the comparison group and the **relative effect** of the intervention (and its 95% CI).

CI: Confidence interval; SMD: Standardised mean difference

GRADE Working Group grades of evidence

High quality: We are very confident that the true effect lies close to that of the estimate of the effect

Moderate quality: We are moderately confident in the effect estimate: The true effect is likely to be close to the estimate of the effect, but there is a possibility that it is substantially different

Low quality: Our confidence in the effect estimate is limited: The true effect may be substantially different from the estimate of the effect

Very low quality: We have very little confidence in the effect estimate: The true effect is likely to be substantially different from the estimate of effect

Quality assessment							№ of patients		Effect		Quality	Importance
№ of studies	Study design	Risk of bias	Inconsistency	Indirectness	Imprecision	Other considerations	Technology (Internet: Information/Education + Professional psychosocial support)	Control	Relative (95% CI)	Absolute (95% CI)		
Change in Depression												
1 ^a	randomised trials	not serious	not serious	not serious	serious ^b	none	90	90	-	SMD 0.34 SD lower (0.63 lower to 0.05 lower)	⊕⊕⊕○ MODERATE	CRITICAL
Change in Anxiety												
1 ^a	randomised trials	not serious	not serious	not serious	serious ^b	none	90	90	-	SMD 0.36 SD lower (0.66 lower to 0.07 lower)	⊕⊕⊕○ MODERATE	CRITICAL

CI: Confidence interval; **SMD:** Standardised mean difference

Explanations

a. Blom, 2015

b. The sample size is <300.

Table 5: Grade table for any internet-based information or education + peer + professional psychosocial support

Patient or population: Caregiver

Intervention: Technology (Internet: Information/Education + Peer & Professional psychosocial support)

Comparison: Control

Outcomes	Anticipated absolute effects* (95% CI)		Relative effect (95% CI)	No of participants (studies)	Quality of the evidence (GRADE)	Comments
	Risk with Control	Risk with Technology (Internet: Information/Education + Peer & Professional psychosocial support)				
Change in Depression	-	SMD 0.11 SD lower (1.01 lower to 0.78 higher)	-	137 (3 RCTs) ^a	⊕○○○ ○ VERY LOW ^{b,c,d}	Assessed using Center for Epidemiologic Studies Depression Scale: CES-D consisting of 20 items. The total score range is 0 to 60.
Change in Stress / Distress	-	SMD 0.3 SD lower (1.05 lower to 0.44 higher)	-	75 (2 RCTs) ^e	⊕○○○ ○ VERY LOW ^{b,d}	Assessed using Neuropsychiatric Inventory (NPI) with 12 domains on a 0 to 5 scale in one study and the degree of stress experienced on a 3-point severity scale in the other study.
Change in Overall Mental health	-	SMD 0.29 SD lower (0.69 lower to 0.11 higher)	-	97 (1 RCT) ^f	⊕○○○ ○ VERY LOW ^{b,d}	Assessed using 16-item subset of negative mood items from the Short Version Profile of Mood States (SV-POMS). Likert-type items are rated on scales from 0–4.
Change in Quality of life	-	SMD 0.55 SD higher (0.1 lower to 1.2 higher)	-	38 (1 RCT) ^g	⊕○○○ ○ VERY LOW ^{b,d}	Assessed using Quality of Life Scale, 16 item questionnaire; measuring six domains of QoL with a range of 16 to 112, higher scores indicate better QoL.

Table 5: Grade table for any internet-based information or education + peer + professional psychosocial support

Patient or population: Caregiver

Intervention: Technology (Internet: Information/Education + Peer & Professional psychosocial support)

Comparison: Control

Outcomes	Anticipated absolute effects* (95% CI)		Relative effect (95% CI)	No of participants (studies)	Quality of the evidence (GRADE)	Comments
	Risk with Control	Risk with Technology (Internet: Information/Education + Peer & Professional psychosocial support)				
Change in Overall health	-	SMD 1.25 SD higher (0.24 higher to 2.25 higher)	-	19 (1 RCT) ^g	⊕○○○ ○ VERY LOW ^h	Assessed using EuroQoL with 5 dimensions of QoL: mobility, self-care, usual activities, pain/discomfort, and anxiety/depression. The sub-scores can be combined to give a summary index value of 0-1.
Change in Coping	-	SMD 0.03 SD lower (0.41 lower to 0.36 higher)	-	104 (1 RCT) ⁱ	⊕○○○ ○ VERY LOW ^{b,d}	Assessed using Brief Copc which was measured using two 5-point Likert-type scale items ranging from 0 (not at all) to 4 (a lot).

*The risk in the intervention group (and its 95% confidence interval) is based on the assumed risk in the comparison group and the **relative effect** of the intervention (and its 95% CI).

CI: Confidence interval; SMD: Standardised mean difference

Table 5: Grade table for any internet-based information or education + peer + professional psychosocial support

Patient or population: Caregiver

Intervention: Technology (Internet: Information/Education + Peer & Professional psychosocial support)

Comparison: Control

Outcomes	Anticipated absolute effects* (95% CI)		Relative effect (95% CI)	N _e of participants (studies)	Quality of the evidence (GRADE)	Comments
	Risk with Control	Risk with Technology (Internet: Information/Education + Peer & Professional psychosocial support)				

GRADE Working Group grades of evidence

High quality: We are very confident that the true effect lies close to that of the estimate of the effect

Moderate quality: We are moderately confident in the effect estimate: The true effect is likely to be close to the estimate of the effect, but there is a possibility that it is substantially different

Low quality: Our confidence in the effect estimate is limited: The true effect may be substantially different from the estimate of the effect

Very low quality: We have very little confidence in the effect estimate: The true effect is likely to be substantially different from the estimate of effect

Quality assessment							Nº of patients		Effect		Quality	Importance
Nº of studies	Study design	Risk of bias	Inconsistency	Indirectness	Imprecision	Other considerations	Technology (Internet: Information/Education + Peer & Professional psychosocial support)	Control	Relative (95% CI)	Absolute (95% CI)		
Change in Depression												
3 ^a	randomised trials	serious ^b	serious ^c	not serious	very serious ^d	none	66	71	-	SMD 0.11 SD lower (1.01 lower to 0.78 higher)	⊕○○○ ○ VERY LOW	CRITICAL
Change in Stress / Distress												
2 ^e	randomised trials	serious ^b	not serious	not serious	very serious ^d	none	40	35	-	SMD 0.3 SD lower (1.05 lower to 0.44 higher)	⊕○○○ ○ VERY LOW	CRITICAL
Change in Overall Mental health												

Quality assessment							N _e of patients		Effect		Quality	Importance
N _e of studies	Study design	Risk of bias	Inconsistency	Indirectness	Imprecision	Other considerations	Technology (Internet: Information/Education + Peer & Professional psychosocial support)	Control	Relative (95% CI)	Absolute (95% CI)		
1 ⁱ	randomised trials	serious ^b	not serious	not serious	very serious ^d	none	49	55	-	SMD 0.03 SD lower (0.41 lower to 0.36 higher)	⊕○○○ ○ VERY LOW	CRITICAL

CI: Confidence interval; **SMD:** Standardised mean difference

Explanations

a. 1) Pierce, 2009; 2) Smith, 2012; 3) Pagan-Ortiz, 2014.

b. Serious concerns regarding risk of bias.

c. The confidence intervals do not overlap across studies and statistical heterogeneity is high (I-squared = 83%; p = 0.002).

d. The sample size is <300 and effect estimate is imprecise.

e. 1) Marziali, 2006; 2) Torkamani, 2014.

f. DuBenske, 2014

g. Torkamani, 2014

h. Serious concerns for risk of bias and sample size <300.

i. Namkoong, 2012

Table 6: Grade table for any internet-based information or education + telephone and monitoring + peer + professional psychosocial support

Patient or population: Caregivers

Intervention: Technology (Internet + telephone: Monitoring + Peer & Professional psychosocial support)

Comparison: Control

Outcomes	Anticipated absolute effects* (95% CI)		Relative effect (95% CI)	No of participants (studies)	Quality of the evidence (GRADE)	Comments
	Risk with Control	Risk with Technology (Internet + telephone: Monitoring + Peer & Professional psychosocial support)				
Change in Quality of life	-	SMD 0.6 SD lower (1.31 lower to 0.11 higher)	-	32 (1 RCT) ^a	⊕○○○ VERY LOW ^{b,c}	Quality of Life in Alzheimer's Disease, Informal caregivers filled-in 2 additional items about their overall judgment of their own quality of life. 15-items rated on a 4-point scale (range 15 to 60).

*The risk in the intervention group (and its 95% confidence interval) is based on the assumed risk in the comparison group and the **relative effect** of the intervention (and its 95% CI).

CI: Confidence interval; SMD: Standardised mean difference

GRADE Working Group grades of evidence

High quality: We are very confident that the true effect lies close to that of the estimate of the effect

Moderate quality: We are moderately confident in the effect estimate: The true effect is likely to be close to the estimate of the effect, but there is a possibility that it is substantially different

Low quality: Our confidence in the effect estimate is limited: The true effect may be substantially different from the estimate of the effect

Very low quality: We have very little confidence in the effect estimate: The true effect is likely to be substantially different from the estimate of effect

Quality assessment							Nº of patients		Effect		Quality	Importance
Nº of studies	Study design	Risk of bias	Inconsistency	Indirectness	Imprecision	Other considerations	Technology (Internet + telephone: Monitoring + Peer & Professional psychosocial support)	Control	Relative (95% CI)	Absolute (95% CI)		
Change in Quality of life												
1 ^a	randomised trials	serious ^b	not serious	not serious	very serious ^c	none	17	15	-	SMD 0.6 SD lower (1.31 lower to 0.11 higher)	⊕○○○ ○ VERY LOW	CRITICAL

CI: Confidence interval; **SMD:** Standardised mean difference

Explanations

a. Hattink, 2016

b. Serious concerns regarding risk of bias.

c. The sample size is <300 and effect estimate is imprecise.